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APPLICANTS

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** CONTINUING DATA ***** *h1* *****

This application is a CIP of 09/859,919 05/17/2001 PAT 6,598,544

** FOREIGN APPLICATIONS ***** *201* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 10/23/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	UT	13	22	3
Verified and Acknowledged	<i>JM</i>	Examiner's Signature	Initials		

ADDRESS

20551

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84070

TITLE

Locking mechanism for folding legs

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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